Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	Application Number	09/685,189	
TRANSMITTAL	Filing Date	October 6, 2000	
FORM	First Named Inventor	Volker Heinrichs	
(to be used for all correspondence after initial filing)	Group Art Unit	1646	
the second of th	Examiner Name	J. Andres	

Total Number o	f Pages in This Subm	ission 36	Attorney Docket Numbe	0240us21	10	
ENCLOSURES (check all that apply)						
Fee Transm	ittal Form Attached		nent Papers Application) (s)	After Allowance Control to Group Appeal Communication of Appeals and Interest Control to the Co	cation to Board	
X Extension o (plus 1 c Express Ab Information	r Final lavits/declaration(s) of Time Request opy) andonment Request Disclosure Statement	Petition and Accomplete Petition Provision Power of Change Address Termina Small Example Reques	I Disclaimer Intity Statement It for Refund Charge Deposit Account eposit Account No. 50-0990	Appeal Communic (Appeal Notice, Brief, Re Proprietary Inform Status Letter Additional Enclos (please identify be Copy of page 2 from 1449 originally subsequences and additional fees asset	ephy Brief) nation ure(s) elow): m an IDS Form mitted March	
Incomplete Resp	to Missing Parts/ Application ponse to Missing s under 37 CFR or 1.53	for consideration Remarks	ing the pendency of this application of the documents enclosed.		isions of time	
F:	SIGNATO	IRE OF APPLI	CANT, ATTORNEY, OR		ECEIVED	
Firm or Individual name	Joanne R. F	Petithory I	Maxygen, Inc. Reg	. No. 42,995	SEP 3 0 2002	
Signature	James	2 Pehtla	iy	TECH	CENTER 1600/29	
Date	Sept.	19, 2007	2			
CERTIFICATE OF MAILING						
Lhereby certify tha	at this correspondence		ed with the United States Po	stal Service as first class	meil in an	

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: G/G/G/G

Typed or printed name Julie K. Mausen

Signature Kull TI puon

Date

Sept 19 2002

16464